I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV534440478US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date show

Dated: July 28, 2006

Patent Docket No. 495812005200

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Gregory P. HERTRICH

Serial No.: 10/807,644

Filing Date: March 23, 2004

CARTRIDGE SHUTTER MECHANISM

Examiner: M. Kayrish

Group Art Unit: 2627

SUPPLEMENTAL INFORMATION DISCLOSURE **STATEMENT UNDER 37 C.F.R. § 1.97 & 1.98**

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. §1.97 and § 1.98, Applicant submits for consideration in the above-identified application the document listed on the attached Form PTO/SB/08a/b. The Examiner is requested to make this document of record.

This Supplemental Information Disclosure Statement is submitted:

With the application; accordingly, no fee or separate requirements are required.
Before the mailing of a first Office Action after the filing of a Request for Continued
Examination under § 1.114. However, if applicable, a certification under 37 C.F.R. § 1.5
(e)(1) has been provided.

08/02/2006 WABDELR1 00000066 031952 10807644

	Withi	in three months of the application filing date or before mailing of a first Office Action
	on the	e merits; accordingly, no fee or separate requirements are required. However, if
	applic	cable, a certification under 37 C.F.R. § 1.97 (e)(1) has been provided.
\boxtimes	After	receipt of a first Office Action on the merits but before mailing of a final Office Action
	or No	tice of Allowance.
		A fee is required. A check in the amount of is enclosed.
	\boxtimes	A fee is required. Accordingly, a Fee Transmittal form (PTO/SB/17) is attached to
		this submission in duplicate.
		A Certification under 37 C.F.R. § 1.97(e) is provided above; accordingly; no fee is
		believed to be due.
	After	mailing of a final Office Action or Notice of Allowance, but before payment of the
	issue	fee.
		A Certification under 37 C.F.R. § 1.97(e) is provided above and a check in the
		amount of is enclosed.
		A Certification under 37 C.F.R. § 1.97(e) is provided above and a Fee Transmittal
		form (PTO/SB/17) is attached to this submission in duplicate.

Applicant would appreciate the Examiner initialing and returning the Form PTO/SB/08a/b, indicating that the information has been considered and made of record herein.

The information contained in this Supplemental Information Disclosure Statement under 37 C.F.R. § 1.97 and § 1.98 is not to be construed as a representation that: (i) a complete search has been made; (ii) additional information material to the examination of this application does not exist; (iii) the information, protocols, results and the like reported by third parties are accurate or enabling; or (iv) the above information constitutes prior art to the subject invention.

In the unlikely event that the transmittal form is separated from this document and the Patent and Trademark Office determines that an extension and/or other relief (such as payment of a fee under 37 C.F.R. § 1.17 (p)) is required, Applicant petitions for any required relief including extensions of time and authorizes the Commissioner to charge the cost of such petition and/or other

fees due in connection with the filing of this document to **Deposit Account No. 03-1952** referencing 495812005200.

Dated: July 28, 2006

Respectfully submitted,

Christopher B. Eide

Registration No.: 48,375

MORRISON & FOERSTER LLP

425 Market Street

San Francisco, California 94105-2482

(650) 813-5720



Complete if Known Substitute for form 1449/PTO Application Number 10/807,644 Filing Date March 23, 2004 INFORMATION DISCLOSURE First Named Inventor Gregory P. HERTRICH STATEMENT BY APPLICANT Art Unit 2627 (Use as many sheets as necessary) **Examiner Name** M. Kayrish 1 495812005200 Sheet 1 of Attorney Docket Number

U.S. PATENT DOCUMENTS								
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear			
	1.	US-7,020,885-B2	03-28-2006	Hertrich				

FOREIGN PATENT DOCUMENTS							
Examiner Initials*	Cite No.1	Foreign Patent Document Country Code ⁵ -Number ⁴ -Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T⁵	
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*EXAMINER: Initial if information considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁴ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁴ Applicant is to place a check mark here if English language Translation is attached.

	NON PATENT LITERATURE DOCUMENTS						
Examiner Initials	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²				

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Examiner	Date	
Signature	Consid	dered

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.

PTO/SB/17 (01-06)
Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.								
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Complete if Known							
•	Application Number	10/807,644						
FEE TRANSMITTAL	Filing Date	March 23, 2004						
For FY 2006	First Named Inventor	Gregory P. HER	RTRICH					
<u> </u>	Examiner Name	M. Kayrish						
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2627						
TOTAL AMOUNT OF PAYMENT (\$) 180.00	Attomey Docket No.	495812005200						
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order No	ne Other (please ide	entify):						
X Deposit Account Deposit Account Number: 03-1952 Deposit Acc	count Name: N	lorrison & Foerst	er LLP					
For the above-identified deposit account, the Director is	s hereby authorized to: (ch	eck all that apply)						
x Charge fee(s) indicated below	Charge fee(s)	indicated below, ex	cept for the filing fee					
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	X Credit any ove	rpayments						
FEE CALCULATION (All the fees below are due upo	n filing or may be sub	ject to a surcha	rge.)					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
		INATION FEES						
Small Entity Application Type Fee (\$) Fee (\$)	Small Entity) Fee (\$) Fee (\$	Small Entity Fee (\$)	Fees Paid (\$)					
Utility 300 150 500	250 200	100	0.00					
Design 200 100 100	50 130		0.00					
Plant 200 100 300	150 160	•	0.00					
Reissue 300 150 500	250 600		0.00					
Provisional 200 100 0	0 0	•	0.00					
2. EXCESS CLAIM FEES	v	•	Small Entity					
Fee Description			Fee (\$) Fee (\$)					
Each claim over 20 (including Reissues)			50 25					
Each independent claim over 3 (including Reissues)	•		200 100					
Multiple dependent claims			360 180					
Total Claims	Paid (\$)	Multiple Depender	nt Claims					
" "	0.00	Fee (\$) <u>F</u>	ee Paid (\$)					
HP = highest number of total claims paid for, if greater than 20.		360.00_	0.00					
	Paid (\$)							
	0.00							
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
- 100 = /50 (round up to a whole number) x 250.00 = 0.00								
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity disc	•		0.00					
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00								
SUBMITTED BY								

SUBMITTED BY						
Signature		$C \subset$	Registration No. (Attorney/Agent)	48,375	Telephone	(650) 813-5720
Name (Print/Type)	Christopher B. Eide				Date	July 28, 2006